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Office Use: ____/___ : ___

2017-2018 Tuition Assistance Application

THIS FORM IS OPTIONAL. Only if you are requesting assistance, fill out this form completely and legibly. You MUST include all W-2's and applicable tax forms and return by <u>February 10, 2017</u> to be considered for assistance.

PRIMARY FINANCIALLY RESPO	ONSIBLE PARTY			
Applicant Last Name	Address		City, State, Zip	
Father	e / Married / Divorced / Separated	Mother	hone:ne:	
Employer:		Employer:		
Primary phone:		Primary phone:		
Email:		Email:		
Religion:		Religion:		
Please list your parish where	you are ACTIVE parish members:			
SECOND FINANCIALLY RESPO	ONSIBLE PARTY (if applicable)			
Last Name	Address		City, State, Zip	
Marital status (circle): Single / Married / Divorced / Separated Father First Name:		Home phone:		
Employer:		Employer:		
Primary phone:		Primary phone:		
Email:		Email:		
Religion:		Religion:		
Please list your parish where	you are ACTIVE parish members:			
ALL CHILDREN IN FAMILY/HO	USEHOLD		Upcoming	
Last Name	First Name	Age	Grade School	

PL	EASE FILL OUT COMPLETELY. You MUST include	e copies of your 2016 W-2's and your 2	2016 Federal Income Tax Return				
1.	Do you receive vouchers from the State of Wisconsin Parental Choice Program:						
2.	All families who receive discounts and assistance (transition grant, scholarships, tuition assistance, etc.) <u>are expected to use the Scrip Program</u> as a means to reduce their tuition. New families may enroll in the Scrip Program and begin using it immediately. Go to <u>smcsscrip.org</u> or contact the SMCS Business Office with Scrip questions. Do you currently use Scrip on a regular basis:						
3.	List your total annual household salary:	\$ Annual gross salary - Household	\$Any additional income (if applicable)				
4.	. List the dollar amount you feel you need as assistance for the upcoming school year: \$						
5.	Please explain your family needs for tuition assistance. Include the effects of extensive medical bills, loss of jobs, disability, family/custody issues, etc. Use additional paper, if necessary.						
6.	Documentation						
	~ MUST include copies of your 2016 W-2's (p						
	~ MUST include copies of your 2016 Federal	Income Tax Return to verify income.	Due by April 30 at the latest.				
Siç	gnature:	Phone #	Date:				

Complete applications with copies of all W-2's will be considered if received by: February 10, 2017

> Mail to: SMCS Business Office 1050 Zephyr Drive Neenah, WI 54956